

June 15, 2016

Tom Moe
USS Corporation
P.O. Box 417
8771 Park Ridge Dr
Mountain Iron, MN 55768

RE: Project: NPDES-TB Wk1
Pace Project No.: 1267255

Dear Tom Moe:

Enclosed are the analytical results for sample(s) received by the laboratory on June 01, 2016. The results relate only to the samples included in this report. Results reported herein conform to the most current TNI standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Melisa M Woods
melisa.woods@pacelabs.com
Project Manager

Enclosures

cc: Cory Hertling
Terri Sabetti, NTS



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
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CERTIFICATIONS

Project: NPDES-TB Wk1

Pace Project No.: 1267255

Virginia Minnesota Certification ID's

315 Chestnut Street, Virginia, MN 55792

Alaska Certification #MN01084

Arizona Department of Health Certification #AZ0785

Minnesota Dept of Health Certification #: 027-137-445

North Dakota Certification: # R-203

Wisconsin DNR Certification # : 998027470

WA Department of Ecology Lab ID# C1007

Nevada DNR #MN010842015-1

Oklahoma Department of Environmental Quality

Duluth Minnesota Certification ID's

4730 Oneota St., Duluth, MN 55807

Minnesota Dept of Health Certification #: 027-137-152

Wisconsin DNR Certification # : 999446800

North Dakota Certification #: R-105

REPORT OF LABORATORY ANALYSIS

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SAMPLE SUMMARY

Project: NPDES-TB Wk1

Pace Project No.: 1267255

Lab ID	Sample ID	Matrix	Date Collected	Date Received
1267255001	SD 001 (Seep 020)	Water	06/01/16 11:00	06/01/16 14:25

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SAMPLE ANALYTE COUNT

Project: NPDES-TB Wk1

Pace Project No.: 1267255

Lab ID	Sample ID	Method	Analysts	Analytes Reported	Laboratory
1267255001	SD 001 (Seep 020)	EPA 1664 TPH	BT1	1	PASI-DUL
		USGS I-3765	BEM	1	PASI-V
		EPA 300.0	DMB	1	PASI-V

REPORT OF LABORATORY ANALYSIS

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ANALYTICAL RESULTS

Project: NPDES-TB Wk1

Pace Project No.: 1267255

Sample: SD 001 (Seep 020)		Lab ID: 1267255001		Collected: 06/01/16 11:00		Received: 06/01/16 14:25		Matrix: Water	
Parameters	Results	Units	Report Limit	MDL	DF	Prepared	Analyzed	CAS No.	Qual
1664 SGT-HEM, TPH									
Analytical Method: EPA 1664 TPH									
Total Petroleum Hydrocarbons	ND	mg/L	3.1	0.92	1		06/08/16 17:37		
USGS I-3765 TSS									
Analytical Method: USGS I-3765									
Total Suspended Solids	3.2	mg/L	1.0	1.0	1		06/06/16 13:13		
300.0 IC Anions 28 Days									
Analytical Method: EPA 300.0									
Sulfate	1030	mg/L	20.0	10.0	10		06/08/16 01:40	14808-79-8	

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QUALITY CONTROL DATA

Project: NPDES-TB Wk1

Pace Project No.: 1267255

QC Batch: DUL/7297

Analysis Method: EPA 1664 TPH

QC Batch Method: EPA 1664 TPH

Analysis Description: 1664 SGT-HEM, TPH

Associated Lab Samples: 1267255001

METHOD BLANK: 327080

Matrix: Water

Associated Lab Samples: 1267255001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Total Petroleum Hydrocarbons	mg/L	ND	3.0	0.90	06/08/16 15:12	

LABORATORY CONTROL SAMPLE: 327081

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Total Petroleum Hydrocarbons	mg/L	20	13.4	67	64-132	

MATRIX SPIKE SAMPLE: 327082

Parameter	Units	1267347001 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Total Petroleum Hydrocarbons	mg/L	<0.94	20.6	13.9	68	64-132	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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QUALITY CONTROL DATA

Project: NPDES-TB Wk1

Pace Project No.: 1267255

QC Batch: WET/24458

Analysis Method: USGS I-3765

QC Batch Method: USGS I-3765

Analysis Description: USGS I-3765 Total Suspended Solids

Associated Lab Samples: 1267255001

METHOD BLANK: 325939

Matrix: Water

Associated Lab Samples: 1267255001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Total Suspended Solids	mg/L	ND	1.0	1.0	06/06/16 13:13	

LABORATORY CONTROL SAMPLE: 325940

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Total Suspended Solids	mg/L	239	230	96	80-120	

SAMPLE DUPLICATE: 325941

Parameter	Units	1267425001 Result	Dup Result	RPD	Max RPD	Qualifiers
Total Suspended Solids	mg/L	312	344	10	10	

SAMPLE DUPLICATE: 325942

Parameter	Units	1267418001 Result	Dup Result	RPD	Max RPD	Qualifiers
Total Suspended Solids	mg/L	40.0	40.0	0	10	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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QUALITY CONTROL DATA

Project: NPDES-TB Wk1

Pace Project No.: 1267255

QC Batch: WETA/17138

Analysis Method: EPA 300.0

QC Batch Method: EPA 300.0

Analysis Description: 300.0 IC Anions

Associated Lab Samples: 1267255001

METHOD BLANK: 326333

Matrix: Water

Associated Lab Samples: 1267255001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Sulfate	mg/L	ND	2.0	1.0	06/07/16 14:47	

LABORATORY CONTROL SAMPLE: 326334

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Sulfate	mg/L	50	52.0	104	90-110	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 326335 326336

Parameter	Units	1267072001 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
Sulfate	mg/L	2.9	50	50	57.1	56.3	108	107	90-110	1	20	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 326337 326338

Parameter	Units	1267402008 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
Sulfate	mg/L	<1.0	50	50	51.9	52.3	102	103	90-110	1	20	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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QUALIFIERS

Project: NPDES-TB Wk1

Pace Project No.: 1267255

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

LABORATORIES

PASI-DUL Pace Analytical Services - Duluth

PASI-V Pace Analytical Services - Virginia

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: NPDES-TB Wk1

Pace Project No.: 1267255

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
1267255001	SD 001 (Seep 020)	EPA 1664 TPH	DUL/7297		
1267255001	SD 001 (Seep 020)	USGS I-3765	WET/24458		
1267255001	SD 001 (Seep 020)	EPA 300.0	WETA/17138		

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CHAIN-OF-CUSTODY / Analytical Request Document
The Chain-of-Custody is a LEGAL DOCUMENT

MO#: 1267255

PM: MM Due Date: 06/15/16

CLIENT: USS CORP

1 Of 1

Section B

Required Project Information:

Report To: Tom Moe

Copy To:

Project Name: NPDES-TB WK1

Project #:

Section C

Invoice Information:

Attention:

Company Name:

Address:

Pace Quote:

Pace Project Manager: heather.zika@paceabs.com

Pace Profile #:

Section A

Required Client Information:

Company: USS Corporation

Address: P.O. Box 417

Mt. Iron, MN 55768

Phone:

Fax:

Requested Due Date:

State / Location

Agency

Revised Analysis Filtered (Y/N)

Preservatives

Analysis Test

TSS,SO4

TRPH 1664

Residual Chlorine (Y/N)

MATRIX CODE
Drinking Water DW
Waste Water WW
Product P
Soil/Solid SL
Oil OL
Wipe WP
Air AR
Other OT
Tissue TS

SAMPLE ID
One Character per box.
(A-Z, 0-9 /, -)
Sample ids must be unique

MATRIX CODE (see valid codes to left)

SAMPLE TYPE (G=GRAB C=COMP)

COLLECTED
START END
DATE TIME DATE TIME
SAMPLE TEMP AT COLLECTION

OF CONTAINERS

Unpreserved

H2SO4

HNO3

HCl

NaOH

Na2S2O3

Methanol

Other

Analysis Test

TSS,SO4

TRPH 1664

Residual Chlorine (Y/N)

State / Location

Agency

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State / Location


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Revised Analysis Filtered (Y/N)

Preservatives

Analysis Test

TSS,SO4

	Document Name:	Document Revised: 23Feb2015
	Sample Condition Upon Receipt Form	Page 1 of 1
	Document No.: F-VM-C-001-Rev.09	Issuing Authority: Pace Virginia, Minnesota Quality Office

Sample Condition Upon Receipt

Client Name:

Project #:

WO#: 1267255



Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☒ Client
☐ Commercial ☐ Pace ☐ Other:

Tracking Number:

Custody Seal on Cooler/Box Present? ☐ Yes ☒ No

Seals Intact? ☐ Yes ☒ No

Optional: Proj. Due Date: Proj. Name:

Packing Material: ☐ Bubble Wrap ☐ Bubble Bags ☐ None ☒ Other: Huspad

Temp Blank? ☒ Yes ☐ No

Thermometer Used: ☒ 140792808

Type of Ice: ☒ Wet ☐ Blue ☐ None ☒ Samples on ice, cooling process has begun

Cooler Temp Read °C:

Cooler Temp Corrected °C:

Biological Tissue Frozen? ☐ Yes ☐ No ☒ N/A

Temp should be above freezing to 6°C

Correction Factor: 4.3

Date and Initials of Person Examining Contents: 6/1/16

Comments:

Chain of Custody Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name and Signature on COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.
Short Hold Time Analysis (<72 hr)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered Volume Received for Dissolved Tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved containers.
Sample Labels Match COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
-Includes Date/Time/ID/Analysis Matrix: <u>wt</u>		
All containers needing acid/base preservation will be checked and documented in the pH logbook.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A	See pH log for results and additional preservation documentation
Headspace in Methyl Mercury Container	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
Headspace in VOA Vials (>6mm)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Trip Blank Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Custody Seals Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

CLIENT NOTIFICATION/RESOLUTION

Field Data Required? ☐ Yes ☐ No

Person Contacted:

Date/Time:

Comments/Resolution:

FECAL WAIVER ON FILE Y N

TEMPERATURE WAIVER ON FILE Y N

Project Manager Review:

Date:

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office. Page 12 of 14
 hold, incorrect preservative, out of temp, incorrect containers)

Intra-Regional Chain of Custody

Workorder: 1267255

Workorder Name: NPDES-TB WK1

Owner Received Date: 6/1/2016

Due Date: 6/15/2016

Received at:

Send To Lab:

Requested Analysis

Pace Analytical Virginia
315 Chestnut Street
Virginia, MN 55792
Phone (218) 742-1042

Pace Analytical Duluth
4730 Oneota Street
Duluth, MN 55807
Phone (218) 727-6380

Report To:
Melissa M Woods

Preserved Containers

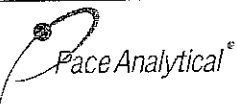
EPA 1664 TPH

LAB USE ONLY

Item	Sample ID	Sample Type	Collect Date/Time	Lab ID	Matrix	HCL	Preserved Containers				Requested Analysis				Comments			
1	SD 001 (Seep 020)	PS	6/1/2016 11:00	1267255001	Water	3					X							
2																		
3																		
4																		
5																		
Transfers																		
1																		
2																		
3																		
4																		

Released By: *[Signature]* Date/Time: 6/2/16 12:50 Received By: *[Signature]* Date/Time: 6/2/16 16:50
Cooler Temperature on Receipt 0.0 °C Custody Seal (Y) or N Received on Ice (Y) or N Samples Intact (Y) or N

In order to maintain client confidentiality, location/name of the sampling site, sampler's name and signature may not be provided on this COC document.
This chain of custody is considered complete as is since this information is available in the owner laboratory.

	Document Name:	Document Revised: 22Jan2016
	Sample Condition Upon Receipt Form	Page 1 of 1
	Document No.: F-DUL-C-001-Rev.01	Issuing Authority: Pace Virginia, Minnesota Quality Office

Sample Condition
Upon Receipt

Client Name:

Project #:

IR-COC

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☐ Client
☐ Commercial ☐ Pace ☒ Other: Mike

Tracking Number:

custody Seal on Cooler/Box Present? ☒ Yes ☐ No

Seals Intact? ☒ Yes ☐ No

Optional: Proj. Due Date: Proj. Name:

acking Material: ☐ Bubble Wrap ☒ Bubble Bags ☐ None ☐ Other:

Temp Blank? ☒ Yes ☐ No

ermometer Used: ☒ 800051

Type of Ice: ☒ Wet ☐ Blue ☐ None ☒ Samples on ice, cooling process has begun

Cooler Temp Read °C: 0.0 Cooler Temp Corrected °C: 0.6

Biological Tissue Frozen? ☐ Yes ☐ No ☒ NA

mp should be above freezing to 6°C Correction Factor: +0.6 °C Date and Initials of Person Examining Contents: U/R/11/16 Kp

Comments:

Chain of Custody Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name and Signature on COC?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	4.
Samples Arrived within Hold Time?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.
Short Hold Time Analysis (<72 hr)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered Volume Received for Dissolved Tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved containers.
Sample Labels Match COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
-Includes Date/Time/ID/Analysis Matrix: <u>WT</u>		
All containers needing acid/base preservation will be checked and documented in the pH logbook.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	See pH log for results and additional preservation documentation
Headspace in Methyl Mercury Container	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	13.
Headspace in VOA Vials (>6mm)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	14.
Trip Blank Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	15.
Trip Blank Custody Seals Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

CLIENT NOTIFICATION/RESOLUTION

Field Data Required? ☐ Yes ☐ No

Person Contacted: _____

Date/Time: _____

Comments/Resolution: _____

FECAL WAIVER ON FILE Y N

TEMPERATURE WAIVER ON FILE Y N

Project Manager Review:

AP for ZMF

Date: 6-3-16

ote: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of old, incorrect preservative, out of temp, incorrect containers)